The Commonwealth of Massachusetts

| | (city or town) | | | |
|---|---------------------|-------------------------------------|--------------------------------|---|
| ANNUAL REPORT - RAFF (C. 810, Acts of | | RS | (date) | ······································ |
| Name and address of Nonprofit Organizat | ion: | | | |
| Expiration Date of Permit: | | | | |
| Number of Raffles and Bazaars Held: | | | | |
| Amount of Money Received: | | \$ | | |
| Expenses Connected with Raffles Conducted | ed: | \$ | | |
| Net Proceeds: | | \$ | | 1 |
| For What Purposes Were The Proceeds Us | sed? | | | |
| | | : | | |
| | | | | |
| Names & Addresses of Winners of \$25.00 | or More: | | | |
| | | | | |
| | | | | |
| (Attach Additional Pages as | | | - | |
| We, the undersigned, do hereby certify tha | t this report is tr | ue and complete. | | |
| | 1 | | | · . |
| | 2 | | - \$ | · · · · · · · · · · · · · · · · · · · |
| (Accountant) | 3 | | | · · · · · · · · · · · · · · · · · · · |
| Report Certified to be in Conformity With C. 810, Acts of 1969: | | | | |
| City/Town Clark | <u>.</u> | Signature of Auth or Member of C | orized Officer Organization | <u>- 1 </u> |

RENEWAL PERMIT WILL NOT BE ISSUED TO LICENSEE UNTIL THIS REPORT
HAS BEEN COMPLETED AND FILED WITH THE COMMISSIONER OF PUBLIC SAFETY.

(Permit Holders also holding Beano Licenses, must submit a Copy of this Report to the Massachusetts State Lottery Commission.)